Medical Needs Policy

(including children with health needs who cannot attend school)

'For I know the plans I have for you, declares the LORD, plans for welfare and not for evil, to give you a future and a hope' - (Jeremiah 29:11)

Review Cycle	Date of Current Policy	Author(s) of Current Policy	Review Date
Annual	November 2026	Mrs Carter & Mrs Lewis	November 2027

Ratification

Role	Name	Signature	Date
Chair of Governors	**Mrs Dean**	J.Dean	**November 2026**
Head Teacher	**Mrs Lewis**	K. Lewis	**November 2026**

Key Staff

Executive Headteacher – Mrs Lewis
Special Educational Needs Coordinator (SENDCO) – Mrs Carter
Inclusion Governor – Mrs Dean
School Business Manager/Lead First Aider – Ms McCrimmon

We aim to ensure that all children, including those with medical conditions can continue to enjoy learning, friendships and play. Parents have the prime responsibility for their child's health and are required to provide the school with information about their child's medical condition before they are admitted to the school, or as soon as the child first develops a particular medical need.

Pupils with Short Term Medical Needs

If children are unwell and unable to cope with a busy school day or if the child has an infectious or contagious condition they should not be sent to school. The school follows current guidance issued by the UK Health Security Agency (UKHSA) regarding infection prevention and recommended exclusion periods for infectious illnesses. The school office staff can advise if necessary. This can be viewed at the following location: https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities under the 'exclusions' tab. The Headteacher reserves the right to send a child home if they are not well enough to be in school or if they are putting others at risk of infection by being in school. If they become ill during the day, parents/carers will be contacted by the school office in order that the child can be taken home. Children may need to take medicines during the day at some time during their time in school. This will usually be for a short period only, perhaps to finish a course of prescribed antibiotics. Where possible doses should be given before or after school, however medicines may be brought into school if it would be detrimental to the child not to do so. Medicines should be brought to school in the original containers with the labels attached. Parents should inform the school (using the forms available from the school office) about the medicines that their child needs to take and provide details of any further support required.

Responsibility for administering prescribed medication

Prescribed medication **must** always be labelled with the child's name, the correct dose and the frequency of dosage before staff can be asked to administer it. The school will ensure that there are sufficient members of support staff who are employed, appropriately trained and willing to manage medicines. The type of training necessary will depend on the individual case. If they are in doubt about any procedure, staff will not administer the medicines but will check with the parents or a health professional before taking further action.

Record-keeping

Staff will complete and sign a record each time they give medicine to a child. These are filed in the school office when the course of prescribed medicine is completed.

Refusal to take medicine

If a child refuses to take medicine, staff will not force them to do so, but will note this in the records and inform parents of the refusal immediately. If a refusal to take medicines results in an emergency, then the usual emergency procedures will be followed.

Storage of medication

All emergency medicines, such as asthma inhalers and adrenaline pens, will be safely stored and will be readily available. They will not be locked away and where children are considered safely able to take care of their own medicines they will be supported to do so. Some medicines need to be refrigerated. These will be kept in the staffroom or kitchen fridge and access will be restricted to the refrigerator holding medicines.

The school maintains emergency Anaphylaxis Kitts containing spare adrenaline auto-injectors in accordance with its Allergy & Anaphylaxis Policy. These may be used in an emergency where appropriate consent is in place and in accordance with current guidance.

Absence from school for more than 15 days

For those children who attend hospital appointments or are admitted to hospital on a regular basis, special arrangements may also need to be considered. In this event advice may be sought from the Inclusion Advice Line and the Children's and Young Person Specialist Service team. Children with medical needs may be unable to attend school for many reasons relating to their condition and, in this event, the school will make arrangements to link the child to suitable learning opportunities with the aim of providing continuity of education, and will facilitate their links with other children so that friendships are sustained.

Pupils with Long Term or Complex Medical Needs

Where a child's needs are particularly complex and could affect their ability to access the full curriculum or participate in other areas of school life, then special arrangements will be made. The Children and Young Person's Specialist Service may be contacted to support any adaptations to the curriculum and/or equipment. In some cases, this might take the form of dedicated adult support, at certain times of the school day. Alternatively, the child's needs could be such that modifications to the learning environment and /or the provision of specialist aids will need to be considered.

Children with severe allergies and those at risk of anaphylaxis will be supported in accordance with the school's Allergy & Anaphylaxis Policy. An up-to-date Allergy Action Plan will form part of the child's Individual Healthcare Plan where appropriate. Staff will receive regular training in recognising and responding to allergic reactions, including the administration of adrenaline auto-injectors (AAIs).

Individual Health Care Plans or Profile

A written Individual Health Care Plan/Profile will be developed, where needed, to clarify for staff, parents and the child, the support that will be provided and what training may be required. This will include:

- Details of the child's medical condition;
- Any medication;
- Daily care requirements;
- Action to be taken in an emergency;
- Parents/carers details including emergency contact numbers.

Those who may contribute to a health care plan/Profile include:

- The school nurse, specialist nurses, children's community nurses, the child's GP or other health care professionals (depending on the level of support the child needs)
- The parents/ carers (and the child, if appropriate)
- The Head teacher and SENDCO
- The class teacher, care assistant or teaching assistant
- Support staff who are trained to administer medicines or trained in emergency procedures.
- Children's and Young Person's Specialist Service

It is good practice to have a health care plan endorsed by a health care professional and in many cases it is essential to do so.

Where a child has a significant medical condition, including severe allergies, an individual risk assessment may be completed to identify and minimise risks across all aspects of school life, including educational visits, catering arrangements and extracurricular activities.

The school will agree with parents how often they should jointly review a health care plan. The timing of this will depend on the nature of the child's particular needs. In most cases this will take place at the start of each school year; however, some plans will need to be reviewed more frequently depending on individual needs. Healthcare plans and training are not transferable, even when children have the same condition.

Training

If school staff need to be trained to administer medical procedures the school will contact the relevant health care professional, eg School Nurse, specialist nurse or children's community nurse. Parents cannot be responsible for leading this training but parents and children will be asked to participate in the training and give advice and guidance on how they prefer things to be done. Parents and school staff cannot cascade training that they have received when the training is specific to an individual child. School staff who have been trained are responsible for following and delivering the health care plan and if the child's condition alters they will contact an appropriate professional and the parents, making them aware of the change and requesting further training if needed or an alteration to the plan. School staff will request further training when needed, and professional updates at least once a year. Staff, who have been trained in the child's care, are responsible for following the procedures in children's care plans as they have been trained to do. The SENDCO will liaise with health care professionals and the trained staff to support and facilitate training refreshers and updates as needed. Individual staff are responsible for identifying and communicating any changes that they notice in the child's care needs. The SENDCO will inform parents and health care professionals in writing and discuss whether further training is needed.

Communicating Needs

Individual Healthcare Plans, Allergy Action Plans and other relevant medical information are securely stored in the school office and electronically on CPOMS. Relevant staff are informed of pupils' medical needs and emergency procedures whilst maintaining confidentiality and data protection requirements.

Educational visits

Visits and school residential trips will be planned so that pupils with medical needs can participate and reasonable adjustments will be made as appropriate to ensure that they are not discriminated against. If a risk assessment indicates that it is not safe for the pupil, their peers or staff, if they participate in part of the experience because of their condition, then reasonable adjustments will be made and an alternative experience will be provided to ensure that they are enabled to join in the curriculum surrounding the trip. Staff supervising excursions and residential trips will always make sure that they are aware of any medical needs, and relevant emergency procedures. The details of this are stored in school on the pupils' Medical Care Plans. In the case of a residential, the visit leader will also seek to meet with the child's parent/carer in advance of the visit to check whether the child has any additional needs to enable them to take a full part. Parents of children participating in residential trips will need to complete the required consent forms giving details of all medical/dietary needs. All medication or equipment, which needs to be administered during the course of the visit, should be handed directly to the class teacher in accordance with the school's guidelines before leaving the school at the start of the trip. A copy of individual health care plans will be taken on visits in the event of the information being needed in an emergency. Arrangements for taking any necessary medicines will be made and if necessary an additional member of the support staff, or an appropriate volunteer might be needed to accompany a particular child. Children's parents will not be required to accompany their own children on school trips. If there is any concern about whether the school is able to provide for a child's safety, or the safety of other children on a visit, then parents will be consulted and medical advice sought from the school health service or the child's GP.

Where a child has an allergy or is at risk of anaphylaxis, staff will ensure prescribed medication, allergy action plans and emergency contact information accompany the child on all off-site visits. At least one member of staff accompanying the visit will have received appropriate allergy awareness and emergency response training.

Sporting Activities

All children with medical conditions will be encouraged to participate as fully as possible in physical activities and extra-curricular sport. For many, physical activity can benefit their overall social, mental and physical health and well-being. Staff will be sensitive to their individual needs and sufficient flexibility will be incorporated into the lesson planning for all children to be included in ways appropriate to their own abilities. Any restrictions on a child's ability to participate in PE will be recorded in their individual health care plan. This will include a reference to any issues of privacy and dignity for children with particular needs. Some children may need to take precautionary measures before or during exercise, and may need to be allowed immediate access to their medicines such as asthma inhalers.

Insurance

This is a maintained school: we link to the local authority as employers who are responsible for insurance arrangements of LA schools and their employees. Somerset County Council (SCC) insures its liabilities up to £50,000,000 in respect of Public and Employers' liability. SCC self-insures for Employers' Liability up to £250,000, Public Liability and Professional Indemnity up to a limit of £1,000,000. The governing body will ensure that appropriate level of insurance is in place and appropriately reflects the level of risk.
This policy is shared with all parents via the school website.

Related Policies

- Allergy & Anaphylaxis Policy
- SEND Policy
- First Aid Policy
- Educational Visits Policy
- Safeguarding and Child Protection Policy

Reviewing the Policy:

This policy will be reviewed annually. However, this may be sooner if it is felt appropriate.